The Challenge

American children and adults were not coping well before the pandemic, and things have only become worse since. Children are experiencing increasing rates of depression, anxiety and suicide. One fifth of adults report having at least one mental illness, and many are also dealing with addictions. Our excessive use of social media may also be causing issues, with many people spending too many sedentary hours online consuming content instead of creating it, putting their mental and physical health at risk.

A Time for Resilience

At times like this, we need resilience. Resilience is our ability to find and use the individual, social and institutional resources (including health care) we need to cope. A focus on resilience shifts attention from what’s going wrong to what people do across the lifespan to cope with unusual stress.

Children. Children’s resilience depends on both their relationships with a parent or caregiver and personal traits like the ability to regulate their emotions.

Young Adults. The period of emerging adulthood is a difficult time for American youth as they move from the security of their relationships with their families, childhood friends and neighbors into post-secondary education and work settings which are potentially stressful. Their resilience depends on healthy individual habits that include leisure activities and limiting screen time. They also need to get the training they need, avoid high-risk sexual activity and delinquency, and maintain healthy relationships with peers and family. Fair treatment and social justice make a big difference in shaping their futures. So, too, does engagement with a more diverse social network that includes people from different cultures and economic backgrounds.

Parents and Caregivers. Family resilience depends on great communication, mutual support to meet basic needs, and the ability to help family members overcome challenges beyond the family’s front door.

Workers. Resilience in the workplace requires workers show both career and personal resilience. This means having the flexibility to take on new work-related challenges while enjoying access to the resources and diverse social support networks that help individuals grow, along with a sense of belonging and a positive attitude towards retraining.

The Pillars and Processes of Resilience

Though studies of resilience could fill a library, researchers have identified a shortlist of pillars and processes common to people who have overcome a difficult start in life and are able to cope when life becomes challenging. Among the factors most relevant to personal resilience are four pillars (awareness and self-reflection; personal skills that strengthen one’s identity; control over one’s life and fair treatment by others; and physical and mental health that results from physical activity, proper nutrition and good sleep hygiene) and three processes (living in diverse communities with abundant social support; experiencing safe spaces and leisure activities; and daily practices that includes personal routines and accessing health care when its needed).

The Process of Building Resilience

The best way to grow resilience is to acquire as many of the pillars and processes as possible. An easy way to remember the ways we build resilience is to use the acronym GROW:

• Ground yourself in the situation.
• Recognize what you can control.
• Organize the resources you need.
• Work with your community for support.

With the concept of GROW in mind, we encourage individuals to think of the phrase “Grow Forth” when confronting a challenging situation or unusual amount of stress.

Conclusion

Nurturing resilience changes our focus from our problems to our potential. When used to its fullest, an applied theory of resilience reminds us that a shortlist of pillars and processes can help us become our best selves. Health services have a critical role to play in helping people develop the personal ruggedness and rich network of resources necessary for resilience across the lifespan.
The Challenge

Clearly, something is wrong. Even before COVID-19 forced us to social distance and undermined connections to our schools, extended families, and workplaces, our resilience was being tested across the lifespan. Sadly, 7% of American children meet the criteria for an anxiety disorder, 3% for depression, and almost 8% for a behavior problem. Rates of depression, suicide, school dropout and substance abuse among adolescents are erasing gains made in other areas such as lowering rates of delinquency. Teens are now less likely to be in jail but are increasingly more likely than a decade ago to report suicidal thoughts and other mental health problems. When they need help, only six out of ten young people are receiving the mental health counseling they need to cope with a mental disorder.

Adults too are suffering. Despite an abundance of healthy eating and weight loss programs, two-thirds of American adults are overweight or obese. Heart disease is growing. Hospitalizations for mental health and addictions problems are also rising steadily. Almost 20% of adults report having at least one mental illness, with one fifth of those who are ill also coping with serious substance abuse problems. All of this is contributing to suicide being the second leading cause of death among younger adults. For people fortunate enough to be working, the number of days they’re absent is rising quickly. Relationships are not going well either. While the rate of divorce has declined, so too has the number of new marriages. Off the job, we are far more likely to live alone than ever before.

All of this is taking place amid a growing concern for the (mis)use of social media. For younger children, just two hours of screen time a day predicts worse academic performance. For older children, more than three hours a day of screen time puts them at risk for depression and physical health problems that come with being sedentary. Adults are at just as much risk as the kids, spending too much time posting to social media. Despite our active online lives, loneliness has become a major problem that is causing mental and physical health issues for many.

And Then Came COVID-19, a Recognition of Systemic Racial Injustice, and Climate Change

Worldwide, more than 90% of all students have had their regular schooling interrupted because of the COVID-19 pandemic. Surveys of children and young adults have shown that they are not getting the services they need to deal with mental health problems either, with as many as one in four reporting less access to mental health supports because of the pandemic. Adults are doing no better. Multiple studies have shown that the pandemic has quadrupled the number of American adults experiencing anxiety and depression, with 40% of those surveyed reporting at least one adverse mental or behavioral health condition. The result is a population with increasing rates of PTSD, substance abuse, social isolation and worsening mental health that shows no sign of improving any time soon.

As if all of this was not already stressful enough, we are also contending with long overdue recognition of systemic racism and social injustice such as Black Lives Matter, #MeToo, and other social movements that are raising questions about our identities and our futures. While these
movements are long overdue, they have the potential to make us feel even more anxious and the world around us far less predictable.

Climate change, too, is stressing children and adults, causing mass destruction of property and forcing hundreds of thousands of families from their homes each year because of extreme weather events that range from forest fires to hurricanes. The World Health Organization estimates that children and youth will suffer more than 80% of the illnesses, injuries and deaths attributable to climate change, largely because they are more vulnerable to the dangers posed by natural disasters, droughts, and forced displacement from their homes.¹⁰

Add all these risks together, from excessive online activity and domestic violence to unhealthy eating habits, pandemics, growing awareness of social injustice and climate change, and the precarious hold Americans have on wellbeing is likely to deteriorate rapidly unless steps are taken to make individuals and communities more resilient.

Twenty-eight percent of children who participated in the Cigna Resilience Index said that increased awareness of racism was casing them distress, while two out of three young adults are feeling stressed and anxious about the recent deaths of Black Americans when interacting with police officers.

Changing the Conversation from Risk to Resilience

For the past fifty years, the science of resilience has been shifting our attention from the factors that put our mental and physical health at risk to the many things we need for healthy psychological, social and physical development. Our resilience is now understood as our ability to navigate to the individual, social and institutional resources (including health care) that we need to cope, and our ability to negotiate for these resources to be provided in ways we experience as meaningful.¹¹

Though studies of resilience could fill a library, American researchers like Ann Masten, Emmy Werner, and Suniya Luthar have identified a shortlist of pillars and processes common to people who have overcome a bad start in life and are able to cope when life becomes challenging. These include self-awareness, opportunities to use personal skills and talents, a sense of control, a diverse community full of new experiences, safe physical and digital spaces, routine practices that make life predictable, and access to the resources one needs for physical and mental health, including health care and public health initiatives that prevent health problems before they start.¹² Broadly speaking, these resilience pillars and processes make us more rugged and better resourced, giving us the strength we need to cope before, during and after a crisis.

Discovering which pillar or process is the most helpful is the key to every individual's resilience story.¹³ To build an individual's resilience, we need to know:

1. Which risk factors are threatening their mental or physical health?
2. Which resilience pillars, and which resilience processes, are the most effective for coping with the challenges they face, given where they live and their cultural background?
3. What outcomes are the most desirable (and therefore the ones they are motivated to pursue)?

The best interventions and programs that build resilience always consider all three questions.

Respondents to the Cigna Resilience Index identified many positive qualities and sources of support that were helping them cope during the pandemic. Children with good peer relationships were almost four times more likely to show resilience than children with unhealthy peer interactions, and young adults who said they are treated fairly at school were four times as likely to score high on a measure of wellbeing. Adults, too, are finding the supports they need to cope, with parents with the most racially and ethnically diverse network of friendships being a third more likely to be coping well. Workers with supportive coworkers and social activities at work are more than twice as likely to have the qualities associated with resilience.

What Happens When We Experience Unusual Amounts of Stress?

We need a stockpile of personal capacities and social and physical supports throughout our lifetimes to effectively deal with stress. These start with a genome full of potentially positive qualities we need to adapt that we inherit from our ancestors and a healthy mother who avoids excessive stress during pregnancy, giving us the best start in life.¹⁴ After birth, it is the quality of our homes, families, schools, workplaces and communities which make us more or less resilient should we become victims of situations beyond our control to handle.

A good way to think about resilience is to imagine our lives as a chain of events, with different people from different backgrounds coping better or worse depending on the personal and social resources they have to succeed.¹⁵ Take, for example Abdullah and Jeremy. Both are born to parents who are racialized minorities living in relative poverty in America, but only Abdullah's family provided a safe and supportive environment during pregnancy, and a well-resourced home with books and structure and a large extended family after birth. Even when Abdullah later experiences a serious threat to his wellbeing in an emotionally toxic workplace, those early experiences will prevent him from a lengthy period of psychological distress, emotional dysregulation or self-destructive behavior.

Contrast Abdullah's life with Jeremy's. Though Jeremy's family wasn't as poor as Abdullah's, Jeremy's mother experienced domestic violence while pregnant with Jeremy and
his family has been constantly on the run from creditors. His father struggled with alcoholism, his mother was unable to hold a job because of depression. Though Jeremy tests above average for intelligence and problem-solving, he never quite realized his potential because of his inconsistent schooling and the lack of support he received at home. As an adult, Jeremy hasn’t managed to attend any post-secondary education or hold a job for more than a few weeks at a time. He is emotionally volatile and lonely, unsure where to turn for help and even less sure he would accept help if it was offered.

Ironically, too little stress and we will lack the psychological and physical immunity we need to deal with life’s challenges (even overprotective parenting is known to decrease children's resilience); but too much stress and we risk becoming overwhelmed and susceptible to mental disorder. Fortunately, adverse childhood experiences (often referred to as ACE) which are known to compromise children’s mental and physical health can be overcome by access to the pillars and processes associated with resilience. For people like Abdullah and Jeremy, we know that a secure relationship with a teacher and consistent parenting that balances structure and caring create the benevolent childhood experiences that undo the harm caused by family problems, like a parent’s addiction, childhood abuse and the other extreme challenges many children encounter.

Across the Lifespan

The pillars and processes that sustain resilience are similar for children and adults, though each developmental phase requires different emphasis on different resilience-promoting factors.

Children. Despite the growing number of single-parent households, the Centers for Disease Control have found that children are two-thirds less likely to experience substance abuse, be exposed to violence or be diagnosed with a mental disorder later in life if they feel connected to at least one caregiver at home or a teacher at school. Children’s resilience also depends on individual traits like the ability to regulate their emotions, though the best personality traits need environments that give children opportunities to become their best selves. That means providing children with consistent family structure, social support from friends and non-kin adults, child-friendly government policies, and when necessary, mental health and social services. The best interventions to build children’s resilience tend to focus on changing more than one system. For example, to address obesity, we need to think just as much about the quality of the child’s school cafeteria as the child’s home pantry, and then consider the child’s capacity to cope with stress and their parents’ attitudes towards healthy eating. Children need a combination of personal, social and institutional supports to ensure a healthy trajectory through life.

Young Adults. The period of emerging adulthood is a difficult time for American youth as they move from the security of their relationships with their families, childhood friends and neighbors (which they may have had for a very long time) into post-secondary education and work settings which are unusual and potentially stressful. Their resilience through these transitions depends on healthy individual habits that include leisure activities and limiting screen time and use of social media that promotes social comparisons. Their resilience is also tied to their ability to get the training they need, avoid high-risk sexual activity and delinquency, and maintain healthy relationships with peers and family while creating new social networks at school or in the workplace. Young adults are particularly vulnerable to mental health problems as they create new relationships, especially when marginalized because of their race, gender, sexual orientation or ability. Fair treatment is of great benefit when it helps them access training and education.

Parents and Caregivers. Family resilience depends on great communication, mutual support to meet basic needs, and the ability to help family members overcome challenges beyond the family’s front door. Whether a family is made up of two parents or one, grandparents raising grandchildren, or a foster family, parents that can provide adequate food, medical care, love and supervision to children not only raise better kids but also bring the parents a sense of life purpose and hopefulness. Good parenting, though, needs support from others. This includes protecting women from violence during pregnancy and early interventions like paid parental leave and other post-natal government policies that support families financially.

Workers. Resilience in the workplace requires workers to show both career and personal resilience. Career resilience means having the flexibility to take on new work-related challenges, along with a positive attitude towards retraining. They also need the economic and intellectual resources necessary to change jobs as industries change and new opportunities open. Workers that show resilience are also able to regulate their emotions in the workplace, know how to talk to their boss and ask for the support they need, maintain safety on the job and nurture work-life balance. Combined, these traits give workers an edge when workplaces become stressed.
The Pillars and Processes of Resilience (And How We Can Improve Them)

Resilience requires a complex weave of rugged personal qualities and social, economic and environmental resources that make resilience more likely to occur when life becomes difficult. Among the factors most relevant to personal resilience in the United States and other high-income countries are four pillars (Awareness, Personal Skills, Control, and Physical and Mental Health) and three processes (Diverse Community, Safe Spaces, and Practice), each with a subset of factors known to make resilience possible.

The Cigna Resilience Index confirmed that age matters. Younger children are fairly immune from the stress that has accompanied social distancing, masks and working from home, though the older children get the more they report benefiting from candid conversations with their parents about events outside the home, and the more they are at risk of over-using social media. As children become young adults, they are losing the support of their parents, less engaged with their schooling, and becoming far too sedentary. Fortunately, as young adults move into their adult years, they are more likely to again feel included and less isolated from family and friends, especially if they live and work in more diverse communities. Social tolerance, optimism and financial health all tend to be higher among adults, especially if they are employed full time.

Resilience Pillars

1) Awareness

Self-Reflection and Problem-Solving

The ability to reflect on one’s life and solve problems is key to resilience, providing opportunities to show individual grit, to set goals, and to monitor personal progress. Studies of children who show more capacity to self-regulate, avoid catastrophic thinking, and maintain an awareness of their actions and their environments have all reported that children with these qualities experience less anxiety and depression.25 Self-reflection also contributes across the lifespan to optimism, which means believing in a better future and attributing bad fortune to circumstances beyond one’s control and good fortune to one’s individual actions. Interventions that improve mindfulness, goalsetting, teach problem-solving, or promote gratitude and other related ways of thinking have been shown to have a small to moderate impact on our overall ability to cope with stress at any age, though the impact of these interventions decreases after the programs end.

2) Personal Skills

A Powerful Identity

We are more resilient when they see ourselves, and are seen by others, as having socially desirable characteristics that allow us to make a contribution or take personal responsibility.26 Children construct their identities in relation to their social group and the meaning and values attached to being a member of that group. Adults, too, seek identities that bring status. The higher our status, the less we fear social comparisons with others which can threaten our self-esteem. Enhancing a positive identity means finding opportunities to use our talents and being acknowledged by others for the contributions we make. Identity formation is the same for everyone regardless of race, ability or gender, but which identities are preferred will always be negotiated through social interactions that affirm an individual’s choice.

3) Control

Self-Efficacy and Empowerment

Self-efficacy is our belief that our actions will have an influence on the world around us. A heightened sense of personal efficacy (and social efficacy as well) is known to affect: (1) the choices we make, with people who feel powerful and in control of their lives showing more willingness to try new things; (2) motivation to take on new challenges, without fear of failure; and (3) the way we think about our personal power, attributing to ourselves the ability to change our world for the better and make decisions that affect us personally.27 Helping children feel powerful and giving them experiences of personal empowerment increases self-esteem and self-confidence, making children more interested in mastering and completing tasks.28 Adults tend to report more social support and greater optimism when they feel in control of their lives.29

According to findings from the Cigna Resilience Index,

- Young adults with low resilience are 8 times less likely to feel they have opportunities to apply their abilities in life, and are 5 times less likely to feel that people like to spend time with them compared to young adults who have high resilience (97% vs. 11%; 96% vs. 17%).
- Full-time workers with lower resilience are 5 times less likely to feel that they have opportunities to apply their abilities in life, and are 16 times less likely to say that people like to spend time with them (97% vs. 19%; 95% vs. 6%).
Fair Treatment

It is difficult to imagine resilience without fair access to the institutional and non-institutional supports and opportunities which help us succeed. Studies of children who have been marginalized because of their race, ethnicity or ability show that children who are offered the chance to fully realize their potential, and are seen by their caregivers and educators as having lots of potential, perform at a much higher level than children who lack opportunities or support. Adults, too, benefit from fair treatment, with more equal societies reporting overall better mental health.

Physical Health

Exercise, good nutrition and sleep are three mutually dependent contributors to good physical and mental health. Recreational opportunities in safe communities and a supportive peer environment are likely to improve physical health. For this reason, good physical health interventions tend to be multidimensional. For example, after school programs for children that combine a physical activity like dance lessons with a healthy snack, opportunities to socialize, support with homework, and transportation, tend to show better participation rates and very positive outcomes across a number of mental health factors like self-esteem and physical health measures related to obesity, diabetes and physical fitness. In some cases, the most effective way to get children to be more active is to provide support to their educators and parents, encouraging them to program into a child’s life more activity. For adults, physical activity that encourages social connections is likely to produce better results than individual exercise regimes one does on their own.

Proper Nutrition

Proper nutrition is critical to biological and psychological health, with malnourishment or unhealthy diets contributing to many mood disorders and problem behaviors. There is even a growing understanding of the link between the naturally occurring bacteria in our guts and our emotional wellbeing, with exposure to enough microbes to stimulate our immune system known to enhance overall mental health. When it comes to changing eating habits, the more that interventions target a shift in attitude, provide new information, open opportunities to eat healthy and physical activity, as well as encourage support from peers, family and colleagues, the more likely our diets will change for the better.

Sleep Hygiene

Children need more sleep than adults, with many studies showing children are not getting enough rest to facilitate optimal neurological development. For adults, poor sleep hygiene is often the result of excessive use of computers, mobile phones, videogames, or TV use just before bed, negative family environment, tobacco use, evening light, and caffeine consumption, all of which have decreased the number of hours we sleep and the quality of the sleep we get. Overall, many factors associated with resilience to stress improve when we get the optimal amount of sleep for our age.

Resilience Processes

1) Diverse Community

Social Support

Social support can be experienced as empathy and understanding, expressions of love, the exchange of information, tangible help with tasks that we need to get done, or simply social interactions that are enjoyable. The more diverse our social networks are (and the more tolerance we show for people who are different from ourselves) the more varied supports we will have to draw upon during a crisis. Different types of social support affect children and adults in different cultures in unique ways, though the more social support children receive the less likely they are to experience depression or behavioral problems. They are also likely to experience less discrimination, or at least feel more secure when they are bullied or marginalized. Parents who receive healthy doses of social support are better able to cope with the stress of raising children, and employees who feel connected in the workplace tend to take fewer sick days. Across the lifespan, social support can come from many sources. The most diverse communities are sources of the most diverse and wide-ranging sources of support.

Good Parenting and Other Intimate Relationships

With only 56% of children in the United States born to married or cohabiting parents who remain together until the child’s 12th birthday, children need lots of special people in their lives to support their psychological and social functioning. Quality caregiving that is consistent over time is known to prevent social and emotional developmental problems, behavioral problems, poorer academic achievement, and worse physical health that comes with family breakdown. Quality caregiving includes emotional attunement to the child’s needs, limits on the child’s behavior, and modeling of the qualities that are desirable for a child, all in culturally appropriate ways. Adults, meanwhile, also need high quality intimate relationships, either with a sexual partner or tight network of extended family and friends. The result is better neurobiological functioning under stress (we can self-regulate more easily when stressed if we are in close proximity to someone we love) and a stronger sense of personal self-worth.
**School and Work Engagement**

While more students today participate in formal education than ever before, children’s level of engagement with their education predicts a number of behavioral problems. That engagement can be expressed through emotional reactions to school (enthusiasm), cognitions (a positive attitude and belief that education matters) and behavior (attending school regularly and participation in learning activities). Children who feel connected to their school and that they matter to their educators are less likely to drop out, less likely to have mental health problems including suicidal thoughts, less likely to be delinquent, and more likely to show healthy patterns of self-regulation and optimism. Employees who experience similar positive emotional reactions to their work and workplace are likely to perform better. They are also likely to find meaning from their work, which affects their overall ability to cope with stress on and off the job. In both school and workplace settings, more diversity among the people studying and working together tends to create a more inclusive, supportive environment that shows greater resilience when crises happen.\(^{45}\)

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### 5) Safe Spaces

**Safety**

Studies of children living in dangerous environments, whether related to political conflicts or domestic violence, tend to report worse psychological outcomes as a consequence of the insecurity they experience.\(^{46}\) Biologically, both children and adults require secure attachments that are not threatened by violence. We also benefit from trust in authority figures like police, clergy and employers who are expected to keep us safe. Unfortunately, many communities, including African American and Black communities and other people of color (e.g. Indigenous peoples), do not benefit from trust in police and other authority figures. Exposure to danger like this undermines our confidence that we will be protected from harm, fracturing attachments and contributing to both individual and collective anxiety. Family rituals, safe streets, social justice and ensuring our basic needs for food, clothing and training are met give us a sense of personal safety and buffer the impact of violence when it does occur.\(^{47}\) People who belong to a faith community may be able to cope better with extreme forms of stress by feeling that their suffering has meaning and that a “higher power” is keeping them safe.\(^{48}\)

**Leisure Activities**

Leisure activities contribute to resilience and mental health. Whether they be structured activities like organized sports or learning to play a musical instrument, or less structured activities like reading, online gaming, listening to music or spending time with friends, there are mental health benefits when an activity is freely chosen and enjoyed.\(^{49}\) Among the benefits children can expect from leisure activities and play are increased optimism, more opportunities to experience their lives as meaningful, and a more positive self-concept. For adolescents and young adults, leisure activities redirect them away from troubling thoughts (ruminating on bad experiences) and delinquent behaviors like substance use. A well-known experiment in Iceland, led by American psychologist Harvey Milkman, showed that a comprehensive government intervention to provide young people with access to recreational opportunities dramatically changed overall rates of mental health and behavior problems, but that the program’s success relied on parents and educators encouraging children to participate.\(^{50}\) For adults with mental disorders like depression, “prescribing” leisure activities is becoming an important part of medically proven recovery plans.\(^{51}\)

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**6) Practice**

**Routines**

Routines make our lives feel predictable. Whether that is our morning routine before work, or annual celebrations like birthdays and religious holidays, routines give us a sense of security. When routines are disrupted, either because of divorce, a change of workplace, or a natural disaster, psychological stress tends to increase.\(^{52}\) Multiple studies have shown that for diverse populations consistent family mealtimes reduces the likelihood that people will experience mental health problems or physical health problems related to disordered eating.\(^{53}\) The impact of such rituals, though, is greatest for families reporting a higher sense of family cohesion (sense of belonging within the family). Girls seem to benefit more from such routines than boys, leading to questions about what boys need in addition to family routines. Routines are also known to improve both school engagement and academic achievement, which means that like other resilience factors, change in one will likely have a positive influence on others as well.

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Results from the Cigna Resilience Index show that workers who feel like they belong at work, and work in more diverse workplaces, or workplaces where they have greater say over what they do, report better mental and physical health. Employment that allows for work-life balance, whether that be a work-from-home arrangement or a profession that naturally provides flexibility, is closely correlated with higher resilience levels. For instance, Gig economy workers are more likely to report very good overall health than other workers (77% vs. 59%) and better work-life balance (62% vs. 47%). This is also true for full time workers who are working from home are more likely to have high resilience than in-person (40% vs. 33%). Workers in socially diverse workplaces are more satisfied with the relationships they have at work (89% vs. 74%). Those working from home report better relationships with their families.
Access to Health Care

Access to quality health care in a timely manner increases resilience by giving people the supports they need to work through a crisis. Health care is understood as both acute care that treats disease or disorder and prevention efforts which anticipate future health problems and puts enough resources in place to ensure people thrive. For example, fully vaccinating children and routinely screening for developmental problems can ensure fewer children experience debilitating conditions that compromise their psychological and physical development. Likewise, studies of access to health care have shown that people who live further from the care they need, or are marginalized because of their race, ethnicity or health insurance status, receive less care when they need it. Access to health care also includes receiving quality dental care, mental health care and treatments from allied professionals like physiotherapists.

The Process of Building Resilience

The best way to grow resilience is to acquire as many of the pillars and processes as possible. The science of resilience shows us that there is a cumulative effect when both the personal qualities that make us more rugged and our access to social, economic and institutional resources are improved. There are six common steps to building resilience.

**Step 1: Acknowledge what you’re dealing with.**

The most effective strategies for resilience are those that begin with a clear assessment of the risks we face. When possible, share the results of needs assessments with others and find an advocate, whether that is a health care provider or your supervisor at work, who can help you tackle the problem. Our problems are seldom ours alone to fix.

**Step 2: Break down the problem.**

Though problems can appear complex and insurmountable when developmental challenges and social and economic worries affect our mental and physical health, change is easier when we break down problems into smaller pieces so they’re less overwhelming. Brainstorm solutions that are achievable given the resources you have on hand.

**Step 3: Determine what is in your control to change.**

Even if a problem appears to be beyond your individual control, or the control of your family, school, workplace or community, there are always solutions that can be tried. Develop actionable plans for change. Begin with those aspects of your life that are easiest to change. Then tackle ‘wicked problems’ that need more time and a larger investment of resources. Success seeds a sense of control and motivates participation in possible solutions.

**Step 4: Find helpful resources.**

Think about your individual rugged qualities and the external resources you already have. Use these to their fullest, then look for new pillars and processes for resilience if problems continue. You don’t have to go it alone. We can lean on the people, places and especially the health and social services, volunteer organizations, faith communities, and advocates in your community to get the help you need.

**Step 5: Act.**

Persistence is key to growing resilience when our lives are plagued by adversity. Mobilize your action plans. Don’t be discouraged by failure as it provides new information and new resources to think about problems differently. When problems remain stuck at one level (e.g., a learning challenge; depression) consider addressing the problem by changing aspects of your life at another level (a child’s learning challenge can be tackled by coaching parents on how to help their child read; finding a network of social supports can prevent the social isolation that feeds adult depression). Connect with as many resources as possible. There is no shame asking for help when problems are complex.

**Step 6: Reflect, grow and repeat.**

Overcoming problems is a journey — sometimes we succeed at rebuilding our lives in new, more resilient ways, other times we lose. As problems are addressed, pause and celebrate each small success. Reflect on what worked and didn’t work, then repeat the most successful strategies as you take on bigger and more chronic problems.

Every plan to build resilience should follow all six steps in one way or another. To be effective, though, our efforts need to be based on a clear understanding of our problems and the right, contextually and culturally relevant strategies required to make us more rugged and better resourced.
One way to remember the things we need to do to build resilience is to use the acronym GROW, which offers a simpler and easier to understand method for confronting and overcoming the challenges we face daily:

- **G**round yourself in the situation.
  - Write down your ideal outcome
- **R**ecognize what you can control.
  - Commit to one thing you can tackle today
- **O**rganize the resources you need.
  - Visit CignaResilience.com to access expert resources
- **W**ork with your community for support.
  - Remember that asking for help is a sign of strength

With the concept of GROW in mind, we encourage individuals to think of the phrase “Grow Forth” when confronting a challenging situation or unusual stress. Remember, our resilience is always something that we can improve.

**Conclusion**

Nurturing resilience changes our focus from our problems to our potential. The science of resilience has much to offer individuals, families, schools, health care providers and even governments looking for solutions to complex problems. When used to its fullest, an applied theory of resilience reminds us that we all need a shortlist of pillars and processes if we are going to become our best selves. It reminds us to think about our lives as nested systems, from individual biology and psychology, to our families, schools, workplaces and communities, each system important to our wellbeing as we age. Health care providers are part of our social ecologies too, providing much needed support when our psychosocial wellbeing is threatened. Mental and physical health services that work are those that match our culture and context, are delivered with consistency, and tap into the resources already in our lives. When they work, they can be scaled up, ensuring everyone develops the personal ruggedness and rich network of resources necessary for resilience.
Exercise: How Much Resilience Do You Have?

Having read about the pillars and processes that build resilience, here's an opportunity to reflect on your own life and the strengths and resources you need during a crisis. The more sentences you can complete in ways that reflect what the science tells us supports wellbeing, the more likely you are to have what you need to succeed when stressed.

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<thead>
<tr>
<th>Self-Reflection and Problem-Solving</th>
<th>Intimate Relationships</th>
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<tbody>
<tr>
<td>• “When bad things happen, I say to myself '_____________' and I feel better.”</td>
<td>• “I am well-cared for by _____________.”</td>
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<tr>
<td>• “When I feel overwhelmed by problems, I have strategies like _______________ to solve them.”</td>
<td>• “There are people in my life who expect me to _______________.”</td>
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<td></td>
<td>• “When I don’t meet expectations, I know that _______________ will happen.”</td>
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<td>Physical Health</td>
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<td>• “I am physically healthy enough to _______________ when I want to.”</td>
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<td>• “Most days, my diet is [healthy/unhealthy] _______________.”</td>
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<tr>
<td>• “Most nights I get [too much/the right amount/not enough] _______________ sleep.”</td>
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<tr>
<td>A Powerful Identity</td>
<td></td>
</tr>
<tr>
<td>• “I feel respected for what is special about me when I am [with/at/doing] _______________.”</td>
<td></td>
</tr>
<tr>
<td>• “When I’m online, I feel _______________.”</td>
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<tr>
<td>Self-Efficacy and Empowerment</td>
<td></td>
</tr>
<tr>
<td>• “In my _______________ I get to participate in making decisions that affect my _______________.”</td>
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<tr>
<td>Fair Treatment</td>
<td></td>
</tr>
<tr>
<td>• “When I am with others at my [name of place] _______________ I feel treated fairly.”</td>
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</tr>
<tr>
<td>• “When I am with _______________ I am responsible for myself and others.”</td>
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<tr>
<td>Social Support</td>
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<tr>
<td>• “At my _______________ people miss me when I’m not there.”</td>
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<tr>
<td>• “I can reach out to my _______________ to get help when I need it.”</td>
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<tr>
<td>Intimate Relationships</td>
<td></td>
</tr>
<tr>
<td>• “I am well-cared for by _______________.”</td>
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<tr>
<td>• “There are people in my life who expect me to _______________.”</td>
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<tr>
<td>• “When I don’t meet expectations, I know that _______________ will happen.”</td>
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<tr>
<td>School/Work Engagement</td>
<td></td>
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<tr>
<td>• “When I’m at school/work I feel _______________.”</td>
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<tr>
<td>Safety</td>
<td></td>
</tr>
<tr>
<td>• “I feel safe when I am [with/at] _______________.”</td>
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<tr>
<td>Leisure Activities</td>
<td></td>
</tr>
<tr>
<td>• “I have places I can go like _______________ to have fun.”</td>
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</tr>
<tr>
<td>• “There are places like _______________ where I can celebrate my culture and beliefs.”</td>
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</tr>
<tr>
<td>• “When I am using screens [like my computer, smartphone, gaming system or television], I usually spend my time [doing what] _______________.”</td>
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<tr>
<td>Routines</td>
<td></td>
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<tr>
<td>• “Most days, my family and I [name a routine or activity] _______________ together.”</td>
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<tr>
<td>• “I enjoy celebrating holidays like _______________ with my family and friends.”</td>
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<tr>
<td>Access to Health Care</td>
<td></td>
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<tr>
<td>• “When I’m sick, I can go to _______________ and get the help I need.”</td>
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</tbody>
</table>
Endnotes


